

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA ALEXANDRIA DIVISION				Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): Perkins, Allan J.			Name of Joint Debtor (Spouse) (Last, First, Middle): Perkins, Laura A.		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):		
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): xxx-xx-4264			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): xxx-xx-6266		
Street Address of Debtor (No. and Street, City, and State): 6920 Floyd Ave. Springfield, VA			Street Address of Joint Debtor (No. and Street, City, and State): 6920 Floyd Ave. Springfield, VA		
ZIP CODE 22150			ZIP CODE 22150		
County of Residence or of the Principal Place of Business: Fairfax			County of Residence or of the Principal Place of Business: Fairfax		
Mailing Address of Debtor (if different from street address):			Mailing Address of Joint Debtor (if different from street address):		
ZIP CODE			ZIP CODE		
Location of Principal Assets of Business Debtor (if different from street address above):					
ZIP CODE					
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.	
Filing Fee (Check one box.) <input checked="" type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3B. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.			Check one box: Chapter 11 Debtors <input type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,800 (amount subject to adjustment on 4/01/13 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).		
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000					
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1,000,000 <input type="checkbox"/> \$1,000,001 to \$10,000,000 <input type="checkbox"/> \$10,000,001 to \$50,000,000 <input type="checkbox"/> \$50,000,001 to \$100,000,000 <input type="checkbox"/> \$100,000,001 to \$500,000,000 <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1,000,000 <input type="checkbox"/> \$1,000,001 to \$10,000,000 <input type="checkbox"/> \$10,000,001 to \$50,000,000 <input type="checkbox"/> \$50,000,001 to \$100,000,000 <input type="checkbox"/> \$100,000,001 to \$500,000,000 <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					

Voluntary Petition*(This page must be completed and filed in every case.)*Name of Debtor(s):
Allan J. Perkins
Laura A. Perkins**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet.)Location Where Filed:
None

Case Number:

Date Filed:

Location Where Filed:

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet.)Name of Debtor:
None

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d))

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each

X /s/ Robert R. Weed
Robert R. Weed09/21/2010
Date**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.
☒ No.**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**
(Check any applicable box.)☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state**Certification by a Debtor Who Resides as a Tenant of Residential Property**
(Check all applicable boxes.)☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)_____
(Name of landlord that obtained judgment)_____
(Address of landlord)☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition*(This page must be completed and filed in every case)*Name of Debtor(s): **Allan J. Perkins**
Laura A. Perkins**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is

true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has

chosen to file under chapter 7] I am aware that I may proceed under chapter 7,

11, 12 or 13 of title 11, United States Code, understand the relief available under

each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the

X /s/ Allan J. Perkins**Allan J. Perkins****X** /s/ Laura A. Perkins**Laura A. Perkins**_____
Telephone Number (If not represented by attorney)09/21/2010_____
Date**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true

and correct, that I am the foreign representative of a debtor in a foreign

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code.☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.**X** _____

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)_____
Date**Signature of Attorney*****X** /s/ Robert R. Weed**Robert R. Weed**Bar No. **24646****Law Office of Robert Weed**
7900 Sudley Rd., Suite 409
Manassas, VA 20109Phone No. **(703) 335-7793**Fax No. **(703) 369-2696**09/21/2010_____
Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as

defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and

have provided the debtor with a copy of this document and the notices and

information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and,

(3) if rules

or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h)

Printed Name and title, if any, of Bankruptcy Petition Preparer_____
Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is

true and correct, and that I have been authorized to file this petition on

behalf of

the debtor.

X _____

Signature of Authorized Individual

Printed Name of Authorized Individual_____
Title of Authorized Individual_____
Date_____
Address**X** __________
Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or

Document Page 4 of 61
UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

In re: Allan J. Perkins
 Laura A. Perkins

Case No. _____
 (if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
 CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

Document Page 5 of 61
B 1D (Official Form 1, Exhibit D) (1209)
UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

In re: Allan J. Perkins
Laura A. Perkins

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Continuation Sheet No. 1

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Allan J. Perkins
Allan J. Perkins

Date: 09/21/2010

Document Page 6 of 61
UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

In re: Allan J. Perkins
 Laura A. Perkins

Case No. _____
 (if known)

Debtor(s)

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☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

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**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION**

In re: Allan J. Perkins
Laura A. Perkins

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Continuation Sheet No. 1

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Laura A. Perkins
Laura A. Perkins

Date: 09/21/2010

In re Allan J. Perkins
 Laura A. Perkins

Case No. _____
 (if known)

SCHEDULE A - REAL PROPERTY

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
6920 Floyd Ave. Springfield, VA 22150 value from cyberhomes.com	Residential	J	\$333,343.00	\$401,693.00
		Total:	\$333,343.00	

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Cash on hand	J	\$2.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account - The National Capital Bank	W	\$560.43
		Checking Account - Commonwealth FCU	W	\$51.26
		Savings Account - The National Capital Bank	W	\$50.00
		Checking Accounts (2) - The National Capital Bank	H	\$335.31
3. Security deposits with public utilities, telephone companies, landlords, and others.		Washington Gas Security Deposit	J	\$395.00
4. Household goods and furnishings, including audio, video and computer equipment.		Kitchen & Dining Room Furniture	J	\$1,280.00
		Living Room Furniture	J	\$550.00
		Bedroom Furniture	J	\$790.00
		Entertainment & Electronics	J	\$2,320.00
		House & Garden Tools	J	\$200.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		Art & Knickknacks	J	\$100.00
		Books	J	\$150.00
6. Wearing apparel.		Clothing	J	\$200.00
7. Furs and jewelry.		Jewelry & Watches	J	\$500.00
		Wedding & Engagement Rings	J	\$1,500.00

B6B (Official Form 6B) (12/07) -- Cont.

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Continuation Sheet No. 1

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
8. Firearms and sports, photo-graphic, and other hobby equipment.		Treadmill & Bike	J	\$150.00
		Piano	J	\$1,000.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Western Southern Whole Life Insurance	W	\$1.00
		Ascension Health Pension	W	\$103,108.09
		Zurich Term Life Insurance	H	\$1.00
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Accelerated Development & Suppt Corp. 401(k)	H	\$11,029.38
		Allstate Insurance Retirement	H	\$1.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			

In re Allan J. Perkins
Laura A. Perkins

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 2

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		Projected 2010 Tax Refund (based on minimal mtg pmts)	J	\$1,000.00
		Accrued Pay	W	\$4,458.67
		Accrued Pay	H	\$682.56
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.		Incoherate Inheritance	J	\$2.00
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			

In re Allan J. Perkins
Laura A. Perkins

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 3

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2005 Rav 4	J	\$8,391.00
		2000 Toyota Sienna	J	\$1,982.00
		2008 Nissan Rogue	J	\$10,139.00
		1995 Nissan Maxima	W	\$851.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Continuation Sheet No. 4

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
31. Animals.		Dog	J	\$500.00
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
Total >				\$152,280.70

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

4 continuation sheets attached

In re Allan J. Perkins
Laura A. Perkins

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under Chapter 11 of the Bankruptcy Code or claims a homestead exemption (Check one box)

- ☐ 11 U.S.C. § 522(b)(2)
☒ 11 U.S.C. § 522(b)(3)

Child of debtor
\$146,450.*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
6920 Floyd Ave. Springfield, VA 22150 value from cyberhomes.com	Va. Code Ann. § 34-4	\$2.00	\$333,343.00
Cash on hand	Va. Code Ann. § 34-4	\$2.00	\$2.00
Checking Account - The National Capital Bank	Va. Code Ann. § 34-4	\$560.43	\$560.43
Checking Account - Commonwealth FCU	Va. Code Ann. § 34-4	\$51.26	\$51.26
Savings Account - The National Capital Bank	Va. Code Ann. § 34-4	\$50.00	\$50.00
Checking Accounts (2) - The National Capital Bank	Va. Code Ann. § 34-4	\$335.31	\$335.31
Washington Gas Security Deposit	Va. Code Ann. § 34-4	\$2.00	\$395.00
Kitchen & Dining Room Furniture	Va. Code Ann. § 34-26(4a)	\$1,280.00	\$1,280.00
Living Room Furniture	Va. Code Ann. § 34-26(4a)	\$550.00	\$550.00
Bedroom Furniture	Va. Code Ann. § 34-26(4a)	\$790.00	\$790.00
Entertainment & Electronics	Va. Code Ann. § 34-26(4a)	\$2,320.00	\$2,320.00
House & Garden Tools	Va. Code Ann. § 34-26(4a)	\$200.00	\$200.00
Art & Knickknacks	Va. Code Ann. § 34-26(4a)	\$100.00	\$100.00
Books	Va. Code Ann. § 34-4	\$2.00	\$150.00
* Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to commenced on or after the date of adjustment.		\$6,245.00	\$340,127.00

In re Allan J. Perkins
Laura A. Perkins

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Continuation Sheet No. 1

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Clothing	Va. Code Ann. § 34-26(4)	\$200.00	\$200.00
Jewelry & Watches	Va. Code Ann. § 34-4	\$2.00	\$500.00
Wedding & Engagement Rings	Va. Code Ann. § 34-26(1a)	\$1,500.00	\$1,500.00
Treadmill & Bike	Va. Code Ann. § 34-4	\$2.00	\$150.00
Piano	Va. Code Ann. § 34-4	\$2.00	\$1,000.00
Western Southern Whole Life Insurance	Va. Code Ann. § 34-4	\$1.00	\$1.00
Ascension Health Pension	522(n) IRA Unlimited	\$103,108.09	\$103,108.09
Zurich Term Life Insurance	Va. Code Ann. § 34-4	\$1.00	\$1.00
Accelerated Development & Suppt Corp. 401(k)	522(n) IRA Unlimited	\$11,029.38	\$11,029.38
Allstate Insurance Retirement	Va. Code Ann. § 34-34	\$1.00	\$1.00
Projected 2010 Tax Refund (based on minimal mtg pmts)	Va. Code Ann. § 34-4	\$1,000.00	\$1,000.00
Accrued Pay	Va. Code Ann. § 34-4	\$1.00	\$4,458.67
	Va. Code Ann. § 34-29	\$3,344.00	
Accrued Pay	Va. Code Ann. § 34-29	\$511.92	\$682.56
	Va. Code Ann. § 34-4	\$1.00	
Incohate Inheritance	Va. Code Ann. § 34-4	\$2.00	\$2.00
2005 Rav 4	Va. Code Ann. § 34-26(8)	\$2,000.00	\$8,391.00
	Va. Code Ann. § 34-4	\$5,272.00	
2000 Toyota Sienna	Va. Code Ann. § 34-4	\$1,982.00	\$1,982.00
		\$136,205.39	\$474,133.70

[illegible]

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: 5342	W	DATE INCURRED: NATURE OF LIEN:		\$1,119.00	
Commonwealth One FCU - Keep 4875 Eisenhower Ave. Alexandria, VA 22304		COLLATERAL: 2005 Tovota Rav 4 REMARKS:			
VALUE: \$8,391.00					
ACCT #: 5342	J	DATE INCURRED: NATURE OF LIEN:		\$16,958.00	\$6,819.00
Commonwealth One FCU - Keep 4875 Eisenhower Ave. Alexandria, VA 22304		COLLATERAL: 2008 Nissan Roque REMARKS:			
VALUE: \$10,139.00					
ACCT #: 68541	J	DATE INCURRED: NATURE OF LIEN:		\$275,004.00	
GMAC Mortgage - Keep POB 4622 Waterloo, IA 50704		1st Mortaaae 6920 Flovd Ave. Sprinafield. REMARKS:			
VALUE: \$333,343.00					
ACCT #: 868641	J	DATE INCURRED: NATURE OF LIEN:		\$126,689.00	\$68,350.00
GMAC Mortgage - Keep POB 4622 Waterloo, IA 50704		2nd Mortaaae 6920 Flovd Ave. Sprinafield. V REMARKS:			
VALUE: \$333,343.00					
Subtotal (Total of this Page) >				\$419,770.00	\$75,169.00
Total (Use only on last page) >				\$419,770.00	\$75,169.00

No continuation sheets attached

(Report also on Summary of Schedule
(If applicable, report also on

B6E (Official Form 6E) (04/10)

In re **Allan J. Perkins**
Laura A. PerkinsCase No. _____
(If Known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed)☐ **Domestic Support Obligations**Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian,
or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of

☐ **Wages, salaries, and commissions**Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to
qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. §

☐ **Deposits by individuals**

Claims of individuals up to \$2,600* for deposits for the purchase, lease or rental of property or services for personal, family, or household use,

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors
of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using

☐ **Administrative allowances under 11 U.S.C. Sec. 330**

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed

* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of

B6E (Official Form 6E) (04/10) - Cont.

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(If Known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

TYPE OF PRIORITY Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT	DEBTOR HUSBAND, WIFE, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO	AMOUNT NOT ENTITLED TO PRIORITY, IF
ACCT #09-0692-9471-5 Fairfax County PO Box 10202 Fairfax, VA 22035	J	DATE INCURRED: 2008-2009 CONSIDERATION: Personal Property Tax REMARKS:		\$539.08	\$539.08	\$0.00
ACCT #09-0614-4950-7 Fairfax County PO Box 10202 Fairfax, VA 22035	J	DATE INCURRED: 2009 CONSIDERATION: Personal Property Tax REMARKS:		\$238.63	\$238.63	\$0.00
ACCT #09-0466-9626-3 Fairfax County PO Box 10202 Fairfax, VA 22035	J	DATE INCURRED: 2009 CONSIDERATION: Personal Property Tax REMARKS:		\$118.34	\$118.34	\$0.00
ACCT #09-0349-6926-4 Fairfax County PO Box 10202 Fairfax, VA 22035	J	DATE INCURRED: 2009 CONSIDERATION: Personal Property Tax REMARKS:		\$88.10	\$88.10	\$0.00
Subtotal (Total of this page) >				\$984.15	\$984.15	\$0.00
Totals >				\$984.15	\$984.15	\$0.00

Sheet no. 1 of 1 continuation sheets
attached to Schedule of Creditors Holding Priority Claims >(Use only on last page of the completed Schedule
E.(Use only on last page of the completed Schedule
E.

If applicable, report also on the Statistical

B6F (Official Form 6F) (12/07)

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM
ACCT #: 3715-740911-01001 Aegis Receivables Mgt. Inc./Amer. Expres PO Box 165809 Irving, TX 75016	W	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only
ACCT #: xxxx4886 Allied Interstate/GEMB Care Credit 3000 Corporate Exchange Dr Columbus, OH 43231	H	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only
ACCT #: 3499905868061453 American Express POB 981537 El Paso, TX 79998	W	DATE INCURRED: CONSIDERATION: REMARKS:		\$3,363.00
ACCT #: 3499911768979243 American Express POB 981537 El Paso, TX 79998	W	DATE INCURRED: CONSIDERATION: REMARKS:		\$18,589.00
ACCT #: 3499916132643653 American Express POB 981537 El Paso, TX 79998	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$5,102.00
ACCT #: 40903140189 Best Practices Inc/INOVA FFX PO Box 75567 Baltimore, MD 21275	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$345.00
Subtotal >				\$27,399.00
Total >				

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

5 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM
ACCT #: 438864207020 Capital One POB 30281 Salt Lake City, UT 84130	J	DATE INCURRED: CONSIDERATION: REMARKS:		\$6,824.00
ACCT #: 438864139327 Capital One PO BOX 30281 Salt Lake City, UT 84130	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$7,115.00
ACCT #: 92121720431E0012008 Dept of Education/Sallie Mae POB 9635 Wilkes Barre, PA 18773	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$15,952.00
ACCT #: 17-15492-0 Dominion Law Assc/American Express 222 Central Park Ave Virginia Beach, VA 23462	W	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only
ACCT #: 13185366 Encore Rcvbl Mgt. Inc./Citibank/Hm Depot 400 N. Rogers Rd. Olathe, KS 66063	W	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only
ACCT #: Case# CL-2009-17706 Fairfax County Circuit Court/Amer. Exp. 4110 Chain Bridge Rd Fairfax, VA 22030	W	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only

Sheet no. 5 of 5 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$29,891.00

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM
ACCT #: 000117278 Ferum College, Students Account Office PO Box 1000 Ferum, VA 24088	W	DATE INCURRED: CONSIDERATION: REMARKS:		\$220.00
ACCT #: FMS Incorporated 4915 S Union Ave Tulsa, OK 74107	W	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only
ACCT #: 462061 GE/JCPenney PO BOX981131 EL Paso, TX 79998	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$5,367.00
ACCT #: 601918036464 Gemb/Care Credit PO BOX 981439 El Paso, TX 79998	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$6,818.00
ACCT #: 603532014135 Home Depot/Citibank PO BOX 6497 Sioux Falls, SD 57117	J	DATE INCURRED: CONSIDERATION: REMARKS:		\$4,708.00
ACCT #: 603532021584 Home Depot/Citibank PO BOX 6497 Sioux Falls, SD 57117	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$17,285.00

Sheet no. 5 of 5 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$34,398.00

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM
ACCT #: 601138102207 HSBC Nevada PO BOX 5253 Carol Stream, IL 60197	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$761.00
ACCT #: 0685416560 Law Offices of Shapiro & Burson LLP/GMAC 13135 Lee Jackson Hwy Ste 201 Fairfax, VA 22033	J	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only
ACCT #: 430333474 Macy's 9111 Duke Blvd Mason, OH 45040	W	DATE INCURRED: CONSIDERATION: REMARKS:		\$2,697.00
ACCT #: Nationwide Credit Corp 2015 Vaughn Rd NW Ste 400 Kennesaw, GA 30144	H	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only
ACCT #: 4388-6420-7020-1747 NCO Financial Systems Inc./Capital One PO Box 12100 Trenton, NJ 08650	W	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only
ACCT #: 6008894620611808 Pinnacle Financial Grp/GE Money 7825 Washington Ave S Ste 310 Minneapolis, MN 55439	H	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only

Sheet no. 3 of 5 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$3,458.00

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM
ACCT #: 9866126126100052004 Sallie Mae 11100 USA Pkwy Fishers, IN 46037	W	DATE INCURRED: CONSIDERATION: REMARKS:		\$66,160.00
ACCT #: 9212172043100012007 Sallie Mae 11100 USA Parkway Fishers, IN 46037	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$14,640.00
ACCT #: 9212172043100032009 Sallie Mae 11100 USA Parkway Fishers, IN 46037	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$3,226.00
ACCT #: 9212172043100042009 Sallie Mae 11100 USA Parkway Fishers, IN 46037	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$10,755.00
ACCT #: 504994100986 Sears/Citibank POB 6241 Sioux Falls, SD 57117	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$2,201.00
ACCT #: 435237505597 Target National Bank PO BOX 673 Minneapolis, MN 55440	W	DATE INCURRED: CONSIDERATION: REMARKS:		\$14,487.00

Sheet no. 4 of 5 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$111,469.00

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBITOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM
ACCT #: 3717-444687-41008 United Recovery Systems/American Express 5800 N Course Dr Houston, TX 77072	W	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only
ACCT #: 12913497-0570 United Recovery Systems/Target 5800 N Course Dr Houston, TX 77072	W	DATE INCURRED: CONSIDERATION: Notice Only REMARKS:		Notice Only
ACCT #: 579804 US Dept of Education-Direct Loans PO BOX 5609 Greenville, TX 75403	H	DATE INCURRED: CONSIDERATION: REMARKS:		\$9,738.00

Sheet no. 5 of 5 continuation sheets attached to Subtotal >
Schedule of Creditors Holding Unsecured Nonpriority Claims Total >

\$9,738.00**\$216,353.00**

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6G (Official Form 6G) (12/07)

In re Allan J. Perkins

Laura A. Perkins

Case No. _____
(if known)**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests.

State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease.

Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to

one of the leases of contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a

minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B6H (Official Form 6H) (12/07)

In re Allan J. Perkins

Laura A. Perkins

Case No. _____

(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor

in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or

territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-

year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

B6I (Official Form 6I) (12/07)

In re Allan J. Perkins

Laura A. Perkins

Case No. _____
(if known)**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed,

unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly

Debtor's Marital Status:	Dependents of Debtor and Spouse	
Married	Relationship(s): Daughter Age(s): 21 Daughter 20	Relationship(s): Age(s):
Employment:	Debtor	Spouse (# of additional employers: 1)
Occupation	Payroll Admin/Benefits Coord	On Call Pharmacist (Part Time)
Name of Employer	Accelerated Development & Support Corp	CVS
How Long Employed	5 yrs	1 yr
Address of Employer	901 N Stuart Ste 908 Arlington, VA 22203	1 CVS Dr Woonsocket, RI 02895

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$3,020.55	\$4,458.67
2. Estimate monthly overtime	\$0.00	\$0.00
3. SUBTOTAL	\$3,020.55	\$4,458.67
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes (includes social security tax if b. is zero)	\$62.90	\$811.78
b. Social Security Tax	\$121.81	\$271.27
c. Medicare	\$28.49	\$12.89
d. Insurance	\$1,052.00	\$0.00
e. Union dues	\$0.00	\$0.00
f. Retirement 401k / Voluntary	\$15.08	\$110.34
g. Other (Specify) 401k loan	\$224.18	\$0.00
h. Other (Specify)	\$0.00	\$0.00
i. Other (Specify)	\$0.00	\$0.00
j. Other (Specify)	\$0.00	\$0.00
k. Other (Specify)	\$0.00	\$0.00
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$1,504.46	\$1,206.28
6. TOTAL NET MONTHLY TAKE HOME PAY	\$1,516.09	\$3,252.39
7. Regular income from operation of business or profession or farm (Attach detailed stmt)	\$0.00	\$0.00
8. Income from real property	\$0.00	\$0.00
9. Interest and dividends	\$0.00	\$0.00
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$0.00	\$0.00
11. Social security or government assistance (Specify):	\$0.00	\$0.00
12. Pension or retirement income	\$0.00	\$0.00
13. Other monthly income (Specify):		
a. / part time job	\$0.00	\$343.42
b.	\$0.00	\$0.00
c.	\$0.00	\$0.00
14. SUBTOTAL OF LINES 7 THROUGH 13	\$0.00	\$343.42
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$1,516.09	\$3,595.81
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)	\$5,111.90	

(Report also on Summary of Schedules and, if applicable,
on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Wife seeking permanent employment.

B6I (Official Form 6I) (12/07)

In re Allan J. Perkins

Laura A. Perkins

Case No. _____

(if known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)*Continuation Sheet No. 1***Additional Employment**

Employment	Debtor	Spouse
Occupation Name of Employer How Long Employed Address of Employer		Pharmacist (Per Diem) RPh on The Go USA, Inc Jacksonville, FL
Employment	Debtor	Spouse
Occupation Name of Employer How Long Employed Address of Employer		

B6J (Official Form 6J) (12/07)

IN RE: Allan J. Perkins
Laura A. PerkinsCase No. _____
(if known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case

filed. Prorate any

payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on



Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures

1. Rent or home mortgage payment (include lot rented for mobile home)	\$2,156.55
a. Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b. Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
2. Utilities: a. Electricity and heating fuel	\$475.00
b. Water and sewer	\$48.00
c. Telephone	\$325.00
d. Other: Internet	\$119.00
3. Home maintenance (repairs and upkeep)	\$100.00
4. Food	\$975.00
5. Clothing	\$150.00
6. Laundry and dry cleaning	\$75.00
7. Medical and dental expenses	\$200.00
8. Transportation (not including car payments)	\$375.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$100.00
10. Charitable contributions	\$750.00
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	
b. Life	\$141.00
c. Health	
d. Auto	\$358.00
e. Other:	
12. Taxes (not deducted from wages or included in home mortgage payments)	\$82.00
Specify: Car Tax	
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a. Auto: Car Payment	\$394.00
b. Other: Car Payment	\$489.00
c. Other:	
d. Other:	
14. Alimony, maintenance, and support paid to others:	
15. Payments for support of add'l dependents not living at your home:	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	
17.a. Other: See attached personal expenses	\$1,727.83
17.b. Other:	
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$9,040.38
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: None.	
20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$5,111.90
b. Average monthly expenses from Line 18 above	\$9,040.38
c. Monthly net income (a. minus b.)	(\$3,928.48)

Document Page 31 of 61
UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

IN RE: Allan J. Perkins
Laura A. Perkins

CASE NO

CHAPTER 7

EXHIBIT TO SCHEDULE J

Itemized Personal Expenses

Expense	Amount
Hair	\$65.00
Trash Pick-up	\$23.00
Kids College Expenses (rent, tuition, books)	\$1,639.83
Total >	\$1,727.83

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION**

In re **Allan J. Perkins**
Laura A. Perkins

Case No.

Chapter **7**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER	
A - Real Property	Yes	1	\$333,343.00			
B - Personal Property	Yes	5	\$152,280.70			
C - Property Claimed as Exempt	Yes	3				
D - Creditors Holding Secured Claims	Yes	1			\$419,770.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2			\$984.15	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6			\$216,353.00	
G - Executory Contracts and Unexpired Leases	Yes	1				
H - Codebtors	Yes	1				
I - Current Income of Individual Debtor(s)	Yes	2				\$5,111.90
J - Current Expenditures of Individual Debtor(s)	Yes	2				\$9,040.38
TOTAL		24	\$485,623.70	\$637,107.15		

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION**

In re **Allan J. Perkins**
Laura A. Perkins

Case No.

Chapter **7**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$984.15
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$120,471.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$121,455.15

State the following:

Average Income (from Schedule I, Line 16)	\$5,111.90
Average Expenses (from Schedule J, Line 18)	\$9,040.38
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$7,821.72

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$75,169.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$984.15	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$216,353.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$291,522.00

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re **Allan J. Perkins**
Laura A. Perkins

Case No. _____
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 26 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 09/21/2010

Signature /s/ Allan J. Perkins
Allan J. Perkins

Date 09/21/2010

Signature /s/ Laura A. Perkins
Laura A. Perkins

[If joint case, both spouses must sign.]

Document Page 35 of 61
UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

In re: **Allan J. Perkins**
Laura A. Perkins

Case No. _____
 (if known)

STATEMENT OF FINANCIAL AFFAIRS

1. Income from employment or operation of business

None

☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income.

AMOUNT	SOURCE
\$37,000.00	2010 Projected Income
\$66726	2009
\$61,261.00	2008
\$47,000.00	2010 Projected Income
\$12,441.00	2009
\$80,723.00	2008

2. Income other than from employment or operation of business

None

☒

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None

☐

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Car Payments	within the last 90 days	\$2,649.72	
GMAC	w/in last 90 days	\$2156.54	
College expenses for kids	w/in last 90 days	\$3022.83	

None

☒

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency.

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UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

In re: **Allan J. Perkins**
Laura A. Perkins

Case No. _____
 (if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 1

None ☐ c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both

4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both

**CAPTION OF SUIT AND
CASE NUMBER**

**American Express Centurion
Bank**

NATURE OF PROCEEDING

Complaint

**COURT OR AGENCY
AND LOCATION**

**Fairfax County Circuit
Court
4110 Chain Bridge Rd
Fairfax, VA 22030**

**STATUS OR
DISPOSITION**

**Return Date-
9/22/10**

v.

**Laura Perkins
Case# CL-2009-17706**

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning

5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must

6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property

7. Gifts

None ☒ List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100

8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both

In re: Allan J. Perkins
Laura A. Perkins

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 2

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Law Offices of Robert Weed 7900 Sudley Rd. Suite 409 Manassas, VA 20109	09/16/2010	\$1,889.00 C.J.
Hummingbird Credit Counseling	9/20/2010	\$68

10. Other transfers

None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
	08/2009	Cashed out 401k \$8000 (wife)
	w/in last 2 yrs	\$7820 withdrawal from 401k (husband)
	Spring 2009	Took loan against 401k \$5500
	July 2009	Cashed in savings bonds \$400 (husband)

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or



11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations,

12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or

Document Page 38 of 61
UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

In re: **Allan J. Perkins**
Laura A. Perkins

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 3

13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether

14. Property held for another person

None



List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None



If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address

16. Spouses and Former Spouses

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if

None



b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material.

None



c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is

B7 (Official Form 7) (04/10) - Cont.

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION**

In re: **Allan J. Perkins**
Laura A. Perkins

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 4

18. Nature, location and name of business

None

☐

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six

**NAME, ADDRESS, AND LAST FOUR DIGITS OF
SOCIAL-SECURITY OR OTHER INDIVIDUAL
TAXPAYER-I.D. NO. (ITIN) / COMPLETE EIN**

NATURE OF BUSINESS**BEGINNING AND ENDING
DATES**

**Accelerated Development & Support Corp.
901 N. Stuart St Ste 908
Arlington, VA 22203**

**Debtor served as the director.
Corporation 100% owned by
brother Garry Perkins.**

02/2005 - 02/2010

None

☒

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. §

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

19. Books, records and financial statements

None

☒

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the

None

☒

b. List all firms or individuals who within two years immediately preceding the filing of this bankruptcy case have audited the books of account

None

☒

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the

None

☒

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by

B7 (Official Form 7) (04/10) - Cont.

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION**

In re: **Allan J. Perkins**
Laura A. Perkins

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 5

20. Inventories

None



a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the

None



b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

21. Current Partners, Officers, Directors and Shareholders

None



a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

None



b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or

22. Former partners, officers, directors and shareholders

None



a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement

None



b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately

23. Withdrawals from a partnership or distributions by a corporation

None



If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the

24. Tax Consolidation Group

None



If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the

25. Pension Funds

None



If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

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UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

In re: **Allan J. Perkins**
Laura A. Perkins

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 6

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date **09/21/2010** _____

Signature **/s/ Allan J. Perkins** _____
of Debtor **Allan J. Perkins**

Date **09/21/2010** _____

Signature **/s/ Laura A. Perkins** _____
of Joint Debtor **Laura A. Perkins**
(if any)

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both.
18 U.S.C. §§ 152 and 3571

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION**

IN RE: Allan J. Perkins
Laura A. Perkins

CASE NO

CHAPTER 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A -- Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: Commonwealth One FCU - Keep 4875 Eisenhower Ave. Alexandria, VA 22304 5342	Describe Property Securing Debt: 2005 Toyota Rav 4
<p>Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained</p> <p>If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain (for example, avoid lien using 11 U.S.C. § 522(f)): Debtor will continue making payments to creditor without reaffirming.</p> <p>Property is (check one): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt</p>	
Property No. 2	
Creditor's Name: Commonwealth One FCU - Keep 4875 Eisenhower Ave. Alexandria, VA 22304 5342	Describe Property Securing Debt: 2008 Nissan Rogue
<p>Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained</p> <p>If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain (for example, avoid lien using 11 U.S.C. § 522(f)): Debtor will continue making payments to creditor without reaffirming.</p> <p>Property is (check one): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt</p>	

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

IN RE: Allan J. Perkins
Laura A. Perkins

CASE NO

CHAPTER 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

Continuation Sheet No. 1

Property No. 3	
Creditor's Name: GMAC Mortgage - Keep POB 4622 Waterloo, IA 50704 68541	Describe Property Securing Debt: 6920 Floyd Ave. Springfield, VA 22150
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain (for example, avoid lien using 11 U.S.C. § 522(f)): Debtor will continue making payments to creditor without reaffirming. Property is (check one): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

Property No. 4	
Creditor's Name: GMAC Mortgage - Keep POB 4622 Waterloo, IA 50704 868641	Describe Property Securing Debt: 6920 Floyd Ave. Springfield, VA 22150
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain (for example, avoid lien using 11 U.S.C. § 522(f)): Debtor will continue making payments to creditor without reaffirming. Property is (check one): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

PART B -- Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION**

IN RE: Allan J. Perkins
Laura A. Perkins

CASE NO

CHAPTER 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

Continuation Sheet No. 2

Property No. 1		
Lessor's Name: None	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): YES <input type="checkbox"/> NO <input type="checkbox"/>

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date 09/21/2010

Signature /s/ Allan J. Perkins
Allan J. Perkins

Date 09/21/2010

Signature /s/ Laura A. Perkins
Laura A. Perkins

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UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

IN RE: **Allan J. Perkins**
Laura A. Perkins

CASE NO

CHAPTER 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept:	<u>\$3,188.00</u>
Prior to the filing of this statement I have received:	<u>\$2,889.00</u>
Balance Due:	<u>\$299.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

09/21/2010

Date

/s/ Robert R. Weed

Robert R. Weed

Law Office of Robert Weed

7900 Sudley Rd., Suite 409

Manassas, VA 20109

Phone: (703) 335-7793 / Fax: (703) 369-2696

Bar No. 24646

/s/ Allan J. Perkins
Allan J. Perkins

/s/ Laura A. Perkins
Laura A. Perkins

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION**

IN RE: Allan J. Perkins
Laura A. Perkins

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 09/21/2010

Signature /s/ Allan J. Perkins
Allan J. Perkins

Date 09/21/2010

Signature /s/ Laura A. Perkins
Laura A. Perkins

Aegis Receivables Mgt. Inc./Amer. Expres
3715-740911-01001
PO Box 165809

Allied Interstate/GEMB Care Credit
xxxx4886
3000 Corporate Exchange Dr

American Express
3499905868061453
POB 981537

American Express
3499911768979243
POB 981537

American Express
3499916132643653
POB 981537

Best Practices Inc/INOVA FFX
40903140189
PO Box 75567

Capital One
438864207020
POB 30281

Capital One
438864139327
PO BOX 30281

Commonwealth One FCU - Keep
5342
4875 Eisenhower Ave.

Dept of Education/Sallie Mae
92121720431E0012008
POB 9635

Dominion Law Assc/American Express
17-15492-0
222 Central Park Ave

Encore Rcvbl Mgt. Inc./Citibank/Hm Depot
13185366
400 N. Rogers Rd.

Fairfax County
09-0692-9471-5
PO Box 10202

Fairfax County
09-0614-4950-7
PO Box 10202

Fairfax County
09-0466-9626-3
PO Box 10202

Fairfax County
09-0349-6926-4
PO Box 10202

Fairfax County Circuit Court/Amer. Exp.
Case# CL-2009-17706
4110 Chain Bridge Rd

Ferum College, Students Account Office
000117278
PO Box 1000

FMS Incorporated
4915 S Union Ave
Tulsa, OK 74107

GE/JCPenney
462061
PO BOX981131

Gemb/Care Credit
601918036464
PO BOX 981439

GMAC Mortgage - Keep
68541
POB 4622

GMAC Mortgage - Keep
868641
POB 4622

Home Depot/Citibank
603532014135
PO BOX 6497

Home Depot/Citibank
603532021584
PO BOX 6497

HSBC Nevada
601138102207
PO BOX 5253

Law Offices of Shapiro & Burson LLP/GMAC
0685416560
13135 Lee Jackson Hwy Ste 201

Macy's
430333474
9111 Duke Blvd

Nationwide Credit Corp
2015 Vaughn Rd NW Ste 400
Kennesaw, GA 30144

NCO Financial Systems Inc./Capital One
4388-6420-7020-1747
PO Box 12100

Pinnacle Financial Grp/GE Money
6008894620611808
7825 Washington Ave S Ste 310

Sallie Mae
9866126126100052004
11100 USA Pkwy

Sallie Mae
9212172043100012007
11100 USA Parkway

Sallie Mae
9212172043100032009
11100 USA Parkway

Sallie Mae
9212172043100042009
11100 USA Parkway

Sears/Citibank
504994100986
POB 6241

Target National Bank
435237505597
PO BOX 673

United Recovery Systems/American Express
3717-444687-41008
5800 N Course Dr

United Recovery Systems/Target
12913497-0570
5800 N Course Dr

US Dept of Education-Direct Loans
579804
PO BOX 5609

B22A (Official Form 22A) (Chapter 7) (04/10)In re: **Allan J. Perkins**

Laura A. Perkins

Case Number:

According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):

☐
☒
☐
The presumption arises.**The presumption does not arise.****The presumption is temporarily inapplicable.****CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION**

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

Part I. MILITARY AND NON-CONSUMER DEBTORS

1A	<p>Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part 1A, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).</p>
1B	<p>Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.</p>
1C	<p>Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.</p> <p><input type="checkbox"/> Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard</p> <p>a. <input type="checkbox"/> I was called to active duty after September 11, 2001, for a period of at least 90 days and <input type="checkbox"/> I remain on active duty /or/ <input type="checkbox"/> I was released from active duty on _____, which is less than 540 days before this bankruptcy case was filed;</p> <p>OR</p> <p>b. <input type="checkbox"/> I am performing homeland defense activity for a period of at least 90 days /or/ <input type="checkbox"/> I performed homeland defense activity for a period of at least 90 days, terminating on _____, which is less than 540 days before this bankruptcy case was filed.</p>

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Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION

2	<p>Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.</p> <p>a. <input type="checkbox"/> Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.</p> <p>b. <input type="checkbox"/> Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code."</p> <p>Complete only Column A ("Debtor's Income") for Lines 3-11.</p> <p>c. <input type="checkbox"/> Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</p> <p>d. <input checked="" type="checkbox"/> Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</p> <p>All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.</p>	<p>Column A</p> <p>Debtor's Income</p>	<p>Column B</p> <p>Spouse's Income</p>												
3	Gross wages, salary, tips, bonuses, overtime, commissions.	\$3,019.63	\$4,802.09												
4	<p>Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.</p> <table border="1" data-bbox="203 850 1128 966"> <tr> <td>a.</td> <td>Gross receipts</td> <td>\$0.00</td> <td>\$0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary business expenses</td> <td>\$0.00</td> <td>\$0.00</td> </tr> <tr> <td>c.</td> <td>Business income</td> <td colspan="2">Subtract Line b from Line a</td> </tr> </table>	a.	Gross receipts	\$0.00	\$0.00	b.	Ordinary and necessary business expenses	\$0.00	\$0.00	c.	Business income	Subtract Line b from Line a		\$0.00	\$0.00
a.	Gross receipts	\$0.00	\$0.00												
b.	Ordinary and necessary business expenses	\$0.00	\$0.00												
c.	Business income	Subtract Line b from Line a													
5	<p>Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.</p> <table border="1" data-bbox="203 1092 1128 1197"> <tr> <td>a.</td> <td>Gross receipts</td> <td>\$0.00</td> <td>\$0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary operating expenses</td> <td>\$0.00</td> <td>\$0.00</td> </tr> <tr> <td>c.</td> <td>Rent and other real property income</td> <td colspan="2">Subtract Line b from Line a</td> </tr> </table>	a.	Gross receipts	\$0.00	\$0.00	b.	Ordinary and necessary operating expenses	\$0.00	\$0.00	c.	Rent and other real property income	Subtract Line b from Line a		\$0.00	\$0.00
a.	Gross receipts	\$0.00	\$0.00												
b.	Ordinary and necessary operating expenses	\$0.00	\$0.00												
c.	Rent and other real property income	Subtract Line b from Line a													
6	Interest, dividends, and royalties.	\$0.00	\$0.00												
7	Pension and retirement income.	\$0.00	\$0.00												
8	<p>Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.</p>	\$0.00	\$0.00												
9	<p>Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:</p> <table border="1" data-bbox="203 1543 1144 1617"> <tr> <td>Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td>Debtor</td> <td>Spouse</td> </tr> <tr> <td></td> <td>\$0.00</td> <td>\$0.00</td> </tr> </table>	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor	Spouse		\$0.00	\$0.00	\$0.00	\$0.00						
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor	Spouse													
	\$0.00	\$0.00													

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10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.								
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 55%;"></td> <td style="width: 40%;"></td> </tr> <tr> <td style="text-align: center;">b.</td> <td></td> <td></td> </tr> </table>	a.			b.				
a.									
b.									
	Total and enter on Line 10	\$0.00	\$0.00						
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).	\$3,019.63	\$4,802.09						
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.	\$7,821.72							

Part III. APPLICATION OF § 707(b)(7) EXCLUSION

13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$93,860.64
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>Virginia</u> b. Enter debtor's household size: <u>4</u>	\$85,633.00
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. <input type="checkbox"/> The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII. <input checked="" type="checkbox"/> The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.	

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)

16	Enter the amount from Line 12.	\$7,821.72									
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.										
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 55%;"></td> <td style="width: 40%;"></td> </tr> <tr> <td style="text-align: center;">b.</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">c.</td> <td></td> <td></td> </tr> </table>	a.			b.			c.			
a.											
b.											
c.											
	Total and enter on line 17.	\$0.00									
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$7,821.72									

Part V. CALCULATION OF DEDUCTIONS FROM INCOME

Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)

19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$1,371.00
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19B	<p>National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th colspan="3" style="text-align: left; padding: 2px;">Household members under 65 years of age</th> <th colspan="3" style="text-align: left; padding: 2px;">Household members 65 years of age or older</th> </tr> </thead> <tbody> <tr> <td style="width: 5%; text-align: center; padding: 2px;">a1.</td><td style="width: 65%; padding: 2px;">Allowance per member</td><td style="width: 30%; text-align: right; padding: 2px;">\$60.00</td> <td style="width: 5%; text-align: center; padding: 2px;">a2.</td><td style="width: 65%; padding: 2px;">Allowance per member</td><td style="width: 30%; text-align: right; padding: 2px;">\$144.00</td> </tr> <tr> <td style="text-align: center; padding: 2px;">b1.</td><td style="padding: 2px;">Number of members</td><td style="text-align: right; padding: 2px;">4</td> <td style="text-align: center; padding: 2px;">b2.</td><td style="padding: 2px;">Number of members</td><td style="padding: 2px;"></td> </tr> <tr> <td style="text-align: center; padding: 2px;">c1.</td><td style="padding: 2px;">Subtotal</td><td style="text-align: right; padding: 2px;">\$240.00</td> <td style="text-align: center; padding: 2px;">c2.</td><td style="padding: 2px;">Subtotal</td><td style="text-align: right; padding: 2px;">\$0.00</td> </tr> </tbody> </table>	Household members under 65 years of age			Household members 65 years of age or older			a1.	Allowance per member	\$60.00	a2.	Allowance per member	\$144.00	b1.	Number of members	4	b2.	Number of members		c1.	Subtotal	\$240.00	c2.	Subtotal	\$0.00	\$240.00
Household members under 65 years of age			Household members 65 years of age or older																							
a1.	Allowance per member	\$60.00	a2.	Allowance per member	\$144.00																					
b1.	Number of members	4	b2.	Number of members																						
c1.	Subtotal	\$240.00	c2.	Subtotal	\$0.00																					
20A	<p>Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$522.00																								
20B	<p>Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. DO NOT ENTER AN AMOUNT LESS THAN ZERO.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tbody> <tr> <td style="width: 5%; text-align: center; padding: 2px;">a.</td><td style="width: 65%; padding: 2px;">IRS Housing and Utilities Standards; mortgage/rental expense</td><td style="width: 30%; text-align: right; padding: 2px;">\$2,145.00</td> </tr> <tr> <td style="text-align: center; padding: 2px;">b.</td><td style="padding: 2px;">Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td><td style="text-align: right; padding: 2px;">\$2,472.55</td> </tr> <tr> <td style="text-align: center; padding: 2px;">c.</td><td style="padding: 2px;">Net mortgage/rental expense</td><td style="padding: 2px;">Subtract Line b from Line a.</td> </tr> </tbody> </table>	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$2,145.00	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$2,472.55	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$0.00															
a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$2,145.00																								
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$2,472.55																								
c.	Net mortgage/rental expense	Subtract Line b from Line a.																								
21	<p>Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p>																									
22A	<p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 or more.</p> <p>If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$540.00																								

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22B	<p>Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$0.00									
23	<p>Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. DO NOT ENTER AN AMOUNT LESS THAN ZERO.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Transportation Standards, Ownership Costs</td><td style="width: 30%; text-align: right;">\$496.00</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42</td><td style="text-align: right;">\$18.65</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 1</td><td style="text-align: right;">Subtract Line b from Line a.</td></tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$496.00	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$18.65	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$477.35
a.	IRS Transportation Standards, Ownership Costs	\$496.00									
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$18.65									
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.									
24	<p>Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. DO NOT ENTER AN AMOUNT LESS THAN ZERO.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Transportation Standards, Ownership Costs</td><td style="width: 30%; text-align: right;">\$496.00</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td><td style="text-align: right;">\$282.63</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 2</td><td style="text-align: right;">Subtract Line b from Line a.</td></tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$496.00	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$282.63	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$213.37
a.	IRS Transportation Standards, Ownership Costs	\$496.00									
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$282.63									
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.									
25	<p>Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self-employment taxes, social-security taxes, and Medicare taxes. DO NOT INCLUDE REAL ESTATE OR SALES TAXES.</p>	\$1,436.10									
26	<p>Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. DO NOT INCLUDE DISCRETIONARY AMOUNTS, SUCH AS VOLUNTARY 401(K) CONTRIBUTIONS.</p>	\$0.00									
27	<p>Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. DO NOT INCLUDE PREMIUMS FOR INSURANCE ON YOUR DEPENDENTS, FOR WHOLE LIFE OR FOR ANY OTHER FORM OF INSURANCE.</p>	\$141.00									
28	<p>Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. DO NOT INCLUDE PAYMENTS ON PAST DUE OBLIGATIONS INCLUDED IN LINE 44.</p>	\$0.00									
29	<p>Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.</p>	\$0.00									
30	<p>Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare--such as baby-sitting, day care, nursery and preschool. DO NOT INCLUDE OTHER EDUCATIONAL PAYMENTS.</p>	\$0.00									
31	<p>Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. DO NOT INCLUDE PAYMENTS FOR HEALTH INSURANCE OR HEALTH SAVINGS ACCOUNTS LISTED IN LINE 34.</p>	\$0.00									

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32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service--such as pagers, call waiting, caller id, special long distance, or internet service--to the extent necessary for your health and welfare or that of your dependents. DO NOT INCLUDE ANY AMOUNT PREVIOUSLY DEDUCTED.	\$49.00									
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.	\$4,989.82									
<p align="center">Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32</p>											
34	<p>Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.</p> <table border="1"> <tr> <td>a.</td> <td>Health Insurance</td> <td>\$1,052.00</td> </tr> <tr> <td>b.</td> <td>Disability Insurance</td> <td>\$0.00</td> </tr> <tr> <td>c.</td> <td>Health Savings Account</td> <td>\$0.00</td> </tr> </table> <p>Total and enter on Line 34</p> <p>IF YOU DO NOT ACTUALLY EXPEND THIS TOTAL AMOUNT, state your actual total average monthly expenditures in the space below:</p> <p>_____</p>	a.	Health Insurance	\$1,052.00	b.	Disability Insurance	\$0.00	c.	Health Savings Account	\$0.00	<p>\$1,052.00</p>
a.	Health Insurance	\$1,052.00									
b.	Disability Insurance	\$0.00									
c.	Health Savings Account	\$0.00									
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$0.00									
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$0.00									
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION OF YOUR ACTUAL EXPENSES, AND YOU MUST DEMONSTRATE THAT THE ADDITIONAL AMOUNT CLAIMED IS REASONABLE AND NECESSARY.	\$445.00									
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION OF YOUR ACTUAL EXPENSES, AND YOU MUST EXPLAIN WHY THE AMOUNT CLAIMED IS REASONABLE AND NECESSARY AND NOT ALREADY ACCOUNTED FOR IN THE IRS STANDARDS.	\$0.00									
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) YOU MUST DEMONSTRATE THAT THE ADDITIONAL AMOUNT CLAIMED IS REASONABLE AND NECESSARY.	\$50.00									
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	\$750.00									
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40.	\$2,297.00									

* Amount(s) are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B22A (Official Form 22A) (Chapter 7) (04/10)**Subpart C: Deductions for Debt Payment**

42	<p>Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 30%;">Name of Creditor</th> <th style="width: 30%;">Property Securing the Debt</th> <th style="width: 15%;">Average Monthly Payment</th> <th style="width: 20%;">Does payment include taxes or insurance?</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td>Commonwealth One FCU - Ke</td> <td>2005 Toyota Rav 4</td> <td style="text-align: right;">\$18.65</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td> </tr> <tr> <td>b.</td> <td>Commonwealth One FCU - Ke</td> <td>2008 Nissan Rogue</td> <td style="text-align: right;">\$282.63</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td> </tr> <tr> <td>c.</td> <td>GMAC Mortgage - Keep</td> <td>6920 Floyd Ave. Springfield,</td> <td style="text-align: right;">\$2,156.55</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td> </tr> <tr> <td></td> <td>(See continuation page.)</td> <td></td> <td>Total: Add Lines a, b and c.</td> <td></td> </tr> </tbody> </table>		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	a.	Commonwealth One FCU - Ke	2005 Toyota Rav 4	\$18.65	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	b.	Commonwealth One FCU - Ke	2008 Nissan Rogue	\$282.63	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	c.	GMAC Mortgage - Keep	6920 Floyd Ave. Springfield,	\$2,156.55	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		(See continuation page.)		Total: Add Lines a, b and c.			\$2,773.83
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?																								
a.	Commonwealth One FCU - Ke	2005 Toyota Rav 4	\$18.65	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no																								
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	(See continuation page.)		Total: Add Lines a, b and c.																									
43	<p>Other payments on secured claims. If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 30%;">Name of Creditor</th> <th style="width: 30%;">Property Securing the Debt</th> <th style="width: 35%;">1/60th of the Cure Amount</th> </tr> </thead> <tbody> <tr><td>a.</td><td></td><td></td><td></td></tr> <tr><td>b.</td><td></td><td></td><td></td></tr> <tr><td>c.</td><td></td><td></td><td></td></tr> <tr> <td></td> <td colspan="2"></td> <td>Total: Add Lines a, b and c</td> </tr> </tbody> </table>		Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount	a.				b.				c.							Total: Add Lines a, b and c		\$0.00					
	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount																									
a.																												
b.																												
c.																												
			Total: Add Lines a, b and c																									
44	<p>Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. DO NOT INCLUDE CURRENT OBLIGATIONS, SUCH AS THOSE SET OUT IN LINE 28.</p>		\$16.40																									
45	<p>Chapter 13 administrative expenses. If you are eligible to file a case under chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 5%;">a.</td> <td style="width: 60%;">Projected average monthly chapter 13 plan payment.</td> <td style="width: 35%; text-align: right;">\$1.00</td> </tr> <tr> <td>b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</td> <td style="text-align: right;">9.5 %</td> </tr> <tr> <td>c.</td> <td>Average monthly administrative expense of chapter 13 case</td> <td>Total: Multiply Lines a and b</td> </tr> </tbody> </table>	a.	Projected average monthly chapter 13 plan payment.	\$1.00	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	9.5 %	c.	Average monthly administrative expense of chapter 13 case	Total: Multiply Lines a and b		\$0.10																
a.	Projected average monthly chapter 13 plan payment.	\$1.00																										
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	9.5 %																										
c.	Average monthly administrative expense of chapter 13 case	Total: Multiply Lines a and b																										
46	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.		\$2,790.33																									
Subpart D: Total Deductions from Income																												
47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.		\$10,077.15																									
Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION																												
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))		\$7,821.72																									
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))		\$10,077.15																									
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.		(\$2,255.43)																									
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.		(\$135,325.80)																									

B22A (Official Form 22A) (Chapter 7) (04/10)

52	<p>Initial presumption determination. Check the applicable box and proceed as directed.</p> <p><input checked="" type="checkbox"/> The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> The amount set forth on Line 51 is more than \$11,725*. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the remainder of Part VI (Lines 53 through 55).</p>
53	<p>Enter the amount of your total non-priority unsecured debt</p>
54	<p>Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.</p>
55	<p>Secondary presumption determination. Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.</p> <p><input type="checkbox"/> The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.</p>

Part VII: ADDITIONAL EXPENSE CLAIMS

56	<p>Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.</p>	
	Expense Description	Monthly Amount
	a.	
	b.	
	c.	
	Total: Add Lines a, b, and c	

Part VIII: VERIFICATION

57	<p>I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this is a joint case, both debtors must sign.)</i></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Date: <u>09/21/2010</u></p> <p>Date: <u>09/21/2010</u></p> </div> <div style="width: 45%;"> <p>Signature: <u>/s/ Allan J. Perkins</u> Allan J. Perkins</p> <p>Signature: <u>/s/ Laura A. Perkins</u> Laura A. Perkins</p> </div> </div>	
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* Amount(s) are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

42. Future payments on secured claims (continued):

Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?
GMAC Mortgage - Keep	6920 Floyd Ave. Springfield, VA 22151	\$316.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no

Document Page 61 of 61
Current Monthly Income Calculation Details

In re: Allan J. Perkins
 Laura A. Perkins

Case Number:
 Chapter: **7**

3. Gross wages, salary, tips, bonuses, overtime commissions.

Debtor or Spouse's Income	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
<u>Debtor</u>	<u>Accelerated Dev & Support Corp</u>						
	\$3,105.90	\$4,373.25	\$2,731.05	\$2,766.75	\$2,659.65	\$2,481.15	\$3,019.63
<u>Spouse</u>	<u>CVS</u>						
	\$0.00	\$1,653.75	\$3,797.75	\$5,433.25	\$10,173.25	\$5,694.04	\$4,458.67
<u>Spouse</u>	<u>RPh on the Go USA, Inc.</u>						
	\$0.00	\$1,696.50	\$364.00	\$0.00	\$0.00	\$0.00	\$343.42